

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		7-19-99
O.I.P.E. CLASSIFIER			7-22-99
FORMALITY REVIEW	HC	71470	8/31/99 11/12/99

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)...	Canceled	A	Appeal
-·-	Restricted	O	Objected

Claim	Date									
Final	b1	b2	b3	b4	b5	b6	b7	b8	b9	b10
Original	10	11	12	13	14	15	16	17	18	19
	01	02	03	04	05	06	07	08	09	10
	1	2	3	4	5	6	7	8	9	10
	11	12	13	14	15	16	17	18	19	20
	21	22	23	24	25	26	27	28	29	30
	31	32	33	34	35	36	37	38	39	40
	41	42	43	44	45	46	47	48	49	50

Claim	Date									
Final	b1	b2	b3	b4	b5	b6	b7	b8	b9	b10
Original	51	52	53	54	55	56	57	58	59	60
	61	62	63	64	65	66	67	68	69	70
	71	72	73	74	75	76	77	78	79	80
	81	82	83	84	85	86	87	88	89	90
	91	92	93	94	95	96	97	98	99	100

Claim	Date									
Final	b1	b2	b3	b4	b5	b6	b7	b8	b9	b10
Original	101	102	103	104	105	106	107	108	109	110
	111	112	113	114	115	116	117	118	119	120
	121	122	123	124	125	126	127	128	129	130
	131	132	133	134	135	136	137	138	139	140
	141	142	143	144	145	146	147	148	149	150

If more than 150 claims or 10 actions
staple additional sheet here